

Division of Health Service Regulation

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: HAL049021	(X2) MULTIPLE CONSTRUCTION A. BUILDING: 01 B. WING: _____	(X3) DATE SURVEY COMPLETED 12/05/2014
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NAME OF PROVIDER OR SUPPLIER BROOKDALE PEACHTREE 2	STREET ADDRESS, CITY, STATE, ZIP CODE 2814 PEACHTREE ROAD STATESVILLE, NC 28625
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(X4) ID PREFIX TAG	SUMMARY STATEMENT OF DEFICIENCIES (EACH DEFICIENCY MUST BE PRECEDED BY FULL REGULATORY OR LSC IDENTIFYING INFORMATION)	ID PREFIX TAG	PROVIDER'S PLAN OF CORRECTION (EACH CORRECTIVE ACTION SHOULD BE CROSS-REFERENCED TO THE APPROPRIATE DEFICIENCY)	(X5) COMPLETE DATE
C 000	Initial Comments This is a Report of a Biennial Construction Survey conducted by Greg Cates and Ed Miller on December 5, 2014. Based on information gathered from our files, this facility was first licensed or submitted for licensure on or about March 17, 1998 for Forty (40) Beds. Based on this information, we are requiring the facility to meet the 1996 Homes for the Aged and Disabled - Minimum Standards and Regulations, the applicable portions of the 2005 Rules for Adult Care Homes of Seven or More Beds, and the 1998 Edition of the North Carolina State Building Code, Section 409.1, Institutional Occupancy Group I.	C 000	See Attached	
C 148	Corridors-Handrails SECTION .0300 - PHYSICAL PLANT 10A NCAC 13F .0305 PHYSICAL ENVIRONMENT (g) The requirements for corridors are: (2) Handrails shall be provided on both sides of corridors at 36 inches above the floor and be capable of supporting a 250 pound concentrated load; This Rule is not met as evidenced by: Based on observations, the facility failed to ensure that the corridors are provided with handrails. This deficiency directly affects all residents and visitors who may require the use of handrails to stabilize themselves while walking or standing. Findings on December 5, 2014 include: a- The 2nd Floor corridor is equipped with a handrail only on one side.	C 148		

Division of Health Service Regulation
LABORATORY DIRECTOR'S OR PROVIDER/SUPPLIER REPRESENTATIVE'S SIGNATURE
Dorricia McCulloch
TITLE
Executive Director
(X6) DATE

Division of Health Service Regulation

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NAME OF PROVIDER OR SUPPLIER BROOKDALE PEACHTREE 2	STREET ADDRESS, CITY, STATE, ZIP CODE 2814 PEACHTREE ROAD STATEVILLE, NC 28626
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C 189	<p>Building Equipment Maintained Safe, Operating</p> <p>SECTION .0300 - PHYSICAL PLANT 10A NCAC 13F .0311 OTHER REQUIREMENTS</p> <p>(a) The building and all fire safety, electrical, mechanical, and plumbing equipment in an adult care home shall be maintained in a safe and operating condition.</p> <p>(k) This Rule shall apply to new and existing facilities with the exception of Paragraph (e) which shall not apply to existing facilities.</p> <p>This Rule is not met as evidenced by: 1- Based on observations, the facility failed to ensure that the fire safety, electrical, mechanical, and plumbing systems are maintained safe and operating.</p> <p>Findings on December 6, 2014 include:</p> <p>a- The ice machine drain pipe extends into the floor drain pipe in the Sprinkler Riser Room which does not allow the required 2-inch air gap between the drain pipe and the floor drain.</p> <p>b- There are no access ports in the return ducts to clean or inspect the duct smoke detector sampling tubes.</p> <p>c- In the Mechanical Room, there are items being stored in the required three-foot clear area in front of the breaker panels.</p> <p>d- The recently installed crown molding in the Entry Foyer is installed within four (4) inches of the sprinkler heads, which may block the coverage of the heads.</p> <p>e- In the following resident rooms, there are extension cords that have been secured to the wall, extending from a receptacle on one wall, secured to the wall over the bathroom door frame, and down the wall to a television on</p>	C 189		

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NAME OF PROVIDER OR SUPPLIER BROOKDALE PEACHTREE 2	STREET ADDRESS, CITY, STATE, ZIP CODE 2014 PEACHTREE ROAD STATESVILLE, NC 28625
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C 189	<p>Continued From page 2</p> <p>another wall. 1- Room 22 2- Room 18</p> <p>f- In the courtyard, there are permanent lights installed at the EXIT gate that are being powered by extension cords that have been tacked to the trellis.</p> <p>g- The emergency light located at the Resident Care coordinator's office does not illuminate on battery power.</p> <p>h- The emergency light located at the Mechanical Room does not illuminate on battery power.</p> <p>i- The smoke door at Peachtree Lane was rubbing against the frame and does not close completely.</p> <p>j- The EXIT sign located at the Clean Linen Room on Peachtree Lane is attached to a junction box that has fallen below the ceiling and is not secured.</p> <p>2- Based on observations, the facility failed to ensure that the building is safe by not maintaining the fire resistance of building components. This deficiency directly affect all residents, personnel, and visitors by allowing the possible spread of smoke beyond the compartment of origin.</p> <p>Findings on December 5, 2014 include:</p> <p>a- The smoke door at Peachtree Lane rubs against the frame which is preventing the door from closing completely.</p> <p>3- Based on observations, the facility failed to ensure that the one-hour rating of the ceiling was maintained. These deficiencies could directly affect all residents, personnel, and visitors to the facility by possibly permitting the spread of fire or smoke beyond the room of origin.</p>	C 189		

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C 188	<p>Continued From page 3</p> <p>Findings on December 5, 2014 include:</p> <p>a- The dryer exhaust vent pipe in the Laundry on Hummingbird Lane has slipped down at the ceiling, exposing a crack around the pipe.</p> <p>b- There is a hole in the ceiling for a data line in the Resident Care Coordinator's Office that is larger than the cable and is not protected with fire caulk.</p> <p>c- There is a large crack in the ceiling near the Associate's Lounge that extends the width of the corridor where the drywall tape has become loose and the drywall joint is exposed.</p> <p>d- In the Mechanical Room on Peachtree Lane, there is a hole in the ceiling for CATV which is much larger than the cable and is not protected with fire caulk.</p> <p>4- Based on observations, the facility failed to ensure that the corridor is protected by smoke resisting walls and doors to prevent the passage of smoke. This deficiency directly affects all residents, personnel, and visitors in the facility as smoke may not be prevented from entering the EXIT corridor.</p> <p>Findings on December 5, 2014 include:</p> <p>a- The corridor door to Room 23 does not latch.</p> <p>b- The corridor door to Room 19 does not latch.</p> <p>c- Corridor door to the Mechanical Room on Peachtree Lane does not latch.</p>	C 188		

Brookdale Peachtree 2 HA Biennial Survey

The following is a summary of the Plan of Correction for Brookdale Peachtree 2. This Plan of Correction is in regards to the Construction Section Biennial Survey conducted on December 5th, 2014 and received on December 23rd, 2014. This Plan of Correction is not to be construed as an admission of or agreement with the findings and conclusions in the Statement of Deficiencies, or any related sanction or fine. Rather, it is submitted as confirmation of our ongoing efforts to comply with statutory and regulatory requirements. In this document, we have outlined specific actions in response to identified issues. We have not provided a detailed response to each allegation or finding, nor have we identified mitigating factors.

2814 Peachtree Rd., Statesville NC 28625

FID #980271 Hal049021

C148 Corridors-Handrails

1. Will install handrails as needed by February 23rd, 2015

C189 Building Maintained Safe Operating

1.
 - a. Will repair drain pipe by February 23rd, 2015
 - b. Will install access points as needed by February 23rd, 2015
 - c. Will remove stored items by February 23rd, 2015
 - d. Will remove molding or modify sprinkler head as needed by February 23rd, 2015
 - e. Will remove extension cords by February 23rd, 2015
 - f. Will remove extension cords by February 23rd, 2015
 - g. Will repair emergency light by February 23rd, 2015
 - h. Will repair emergency light by February 23rd, 2015
 - i. Will repair door by February 23rd, 2015
 - j. Will secure junction box by February 23rd, 2015
2. Will repair door by February 23rd, 2015
3. Will seal penetrations by February 23rd, 2015
4. Will repair doors by February 23rd, 2015

To assist with compliance, the Executive Director or designee will review monthly preventative maintenance reports completed by the Maintenance Technician and will do a monthly walk through of the building with the Maintenance Technician for two months.

Patricia McCubbin, Executive Director

12/31/14